## Case 22-11818-amc Doc 28 Filed 07/28/22 Entered 07/28/22 22:22:35 Desc Main Document Page 1 of 30

Fill in this information to identify your case and this filing:				
Debtor 1	Keith	M.	Scriven	
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse, if filing)	First Name	Middle Name	Last Name	
United States	Bankruptcy Court for the		Pennsylvania	
Case number	22 - 11818 AM	S		

Official Form 106A/B

## **Schedule A/B: Property**

12/15

☐ Check if this is an amended filing

In each category, separately list and describe items. List an asset only once. If an asset fits in more than one category, list the asset in the category where you think it fits best. Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

#### Part 1: Describe Each Residence, Building, Land, or Other Real Estate You Own or Have an Interest In

1007 North 6th Str	eet	escription	What is the property? Check all that apply.  ✓ Single-family home  Duplex or multi-unit building  Condominium or cooperative  Manufactured or mobile home	the amount of any secured Creditors Who Have Claim  Current value of the entire property?	d claims on Schedule D ns Secured by Property Current value of the portion you own?
Philadelphia,	PA State	19123 ZIP Code	☐ Land ☐ Investment property ☐ Timeshare ☐ Other	Describe the nature of interest (such as feet)	simple, tenancy by
			Who has an interest in the property? Check one.	fee simple	
County	В			(see instructions) em, such as local	mmunity property
1009 North 6th Str	eet		What is the property? Check all that apply.  ☐ Single-family home ☐ Duplex or multi-unit building ☐ Condominium or cooperative	the amount of any secured Creditors Who Have Clain	d claims on Schedule I
Philadelphia,	PA State	19123	<ul> <li>□ Manufactured or mobile home</li> <li>□ Land</li> <li>□ Investment property</li> <li>□ Timeshare</li> </ul>	entire property? \$ 185,000.00  Describe the nature of	portion you own? \$ 185,000
Oity	State	ZIF Code	Other	the entireties, or a life	
Philadelphia County			Who has an interest in the property? Check one.  Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only	Check if this is co	mmunity property
	1007 North 6th Str Street address, if available,  Philadelphia, City  Philadelphia County  own or have more than of 1009 North 6th Str Street address, if available,  Philadelphia, City  Philadelphia	Philadelphia, PA City State  Philadelphia County  own or have more than one, list h  1009 North 6th Street Street address, if available, or other description  Philadelphia, PA City State  Philadelphia	The street address, if available, or other description  Philadelphia, PA 19123  City State ZIP Code  Philadelphia  County  Own or have more than one, list here:  1009 North 6th Street  Street address, if available, or other description  Philadelphia, PA 19123  City State ZIP Code  Philadelphia  City State ZIP Code	1007 North 6th Street   Street address, if available, or other description	1007 North 6th Street   Street address, if available, or other description   Duplex or multi-unit building   Condominium or cooperative   Describe the amount of any secures   Creditors Who Have Claim   Condominium or cooperative   Current value of the entire property?

# UNITED STATES BANKRUPTCY COURT for the Eastern District of Pennsylvania

:

In re : Case No. 22 - 11818

Keith M. Scriven : (Chapter 11)

Debtor. :

: Hon. Ashely M. Chan

:

### Addendum to Schedule A

### Part 1: Real Property

1.1)	1007 North 6 <sup>th</sup> Str	19123 single	Debtor	\$769,100.00
1.2)	1009 North 6 <sup>th</sup> Str	19123 land	Debtor	\$185,000.00
1.3)	324 Queen, Unt B	19147 condo	joint	\$288,950.00
1.4)	25 Fire Island Blvd	11782 single	Debtor	\$761,100.00
1.5)	341A Shell Walk	11782 single	Debtor	\$814,200.00

\$2,818,350.00

Case 22-11818-amc Doc 28 Filed 07/28/22 Entered 07/28/22 22:22:35 Desc Main

Debtor 1 Keith M. Scriven Document Page 3 of 3Qe number (if known) 22 - 11818 AMC

What is the property? Check all that apply. Do not deduct secured claims or exemptions. Put the amount of any secured claims on Schedule D: Single-family home 324 Queen Street Creditors Who Have Claims Secured by Property. Street address, if available, or other description Duplex or multi-unit building Current value of the Current value of the Condominium or cooperative entire property? portion you own? Unit # B ■ Manufactured or mobile home 577,900.00 288.950.00 ☐ Land Philadelphia. PA 19123 ■ Investment property Describe the nature of your ownership City State ☐ Timeshare ZIP Code interest (such as fee simple, tenancy by Other the entireties, or a life estate), if known. co tenancy Who has an interest in the property? Check one. Philadelphia Debtor 1 only County Debtor 2 only Check if this is community property ☐ Debtor 1 and Debtor 2 only (see instructions) At least one of the debtors and another Other information you wish to add about this item, such as local property identification number: \_ 2. Add the dollar value of the portion you own for all of your entries from Part 1, including any entries for pages 2,818,350.00 you have attached for Part 1. Write that number here. **Describe Your Vehicles** Part 2: Do you own, lease, or have legal or equitable interest in any vehicles, whether they are registered or not? Include any vehicles you own that someone else drives. If you lease a vehicle, also report it on Schedule G: Executory Contracts and Unexpired Leases. 3. Cars, vans, trucks, tractors, sport utility vehicles, motorcycles ☐ No **✓** Yes Hummer Who has an interest in the property? Check one. Do not deduct secured claims or exemptions. Put 3.1 Make: the amount of any secured claims on Schedule D: Debtor 1 only Creditors Who Have Claims Secured by Property. Model: Debtor 2 only 2005 Year: Current value of the Current value of the Debtor 1 and Debtor 2 only 160,000 entire property? portion you own? Approximate mileage: ☐ At least one of the debtors and another Other information: 8,600.00 8,600.00 ☐ Check if this is community property (see 2005 Hummer H2 instructions) If you own or have more than one, describe here: Who has an interest in the property? Check one. 3.2. Make: Do not deduct secured claims or exemptions. Put the amount of any secured claims on Schedule D: Debtor 1 only Model: Creditors Who Have Claims Secured by Property. Debtor 2 only Year: Current value of the Current value of the Debtor 1 and Debtor 2 only entire property? portion you own? Approximate mileage: At least one of the debtors and another Other information: ☐ Check if this is community property (see instructions)

 
 Case 22-11818-amc
 Doc 28
 Filed 07/28/22
 Entered 07/28/22 22:22:35
 Desc Main

 Keith
 M.
 Scriven Document
 Page 4 of 3Qe number (if known) 22 - 11818 AMC
 Debtor 1

3.3.	Model:	Who has an interest in the property? Check one.  □ Debtor 1 only □ Debtor 2 only	Do not deduct secured cla the amount of any secure Creditors Who Have Claim	d claims on <i>Schedule D:</i>
	Year:Approximate mileage:	Debtor 1 and Debtor 2 only  At least one of the debtors and another	Current value of the entire property?	Current value of the portion you own?
	Other information:	☐ Check if this is community property (see instructions)	\$	\$
3.4.	Make:	Who has an interest in the property? Check one.  Debtor 1 only	Do not deduct secured cla the amount of any secure Creditors Who Have Clain	d claims on Schedule D:
	Year:Approximate mileage:	□ Debtor 2 only □ Debtor 1 and Debtor 2 only □ At least one of the debtors and another	Current value of the entire property?	Current value of the portion you own?
	Other information:	☐ Check if this is community property (see instructions)	\$	\$
_	/es	Who has an interest in the property? Check one.  Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another	Do not deduct secured clathe amount of any secured Creditors Who Have Claim  Current value of the entire property?	d claims on Schedule D:
4.1.	Make:  Model:  Year:  Other information:	Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another  Check if this is community property (see instructions)	the amount of any secure Creditors Who Have Claim Current value of the	d claims on Schedule D: ns Secured by Property.  Current value of the
4.1.	Make: Model: Other information: own or have more than one, list here: Make: Model: Model:	Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this is community property (see instructions)  Who has an interest in the property? Check one. Debtor 1 only	the amount of any secure Creditors Who Have Clain  Current value of the entire property?	d claims on Schedule D: ns Secured by Property.  Current value of the portion you own?  \$
4.1.	Make: Model: Other information: own or have more than one, list here: Make: Make:	□ Debtor 1 only □ Debtor 2 only □ Debtor 1 and Debtor 2 only □ At least one of the debtors and another □ Check if this is community property (see instructions)  Who has an interest in the property? Check one.	the amount of any securer Creditors Who Have Claim  Current value of the entire property?  \$  Do not deduct secured clathe amount of any securer	d claims on Schedule D: ns Secured by Property.  Current value of the portion you own?  \$
4.1.	Make: Model: Other information: where the model is the model: Make: Model: Model: Year: Model:	Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another  Check if this is community property (see instructions)  Who has an interest in the property? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only	the amount of any secure Creditors Who Have Claim  Current value of the entire property?  \$  Do not deduct secured clathe amount of any secure Creditors Who Have Claim  Current value of the	d claims on Schedule D: ns Secured by Property.  Current value of the portion you own?  \$

Debtor 1

#### **Describe Your Personal and Household Items**

Do	o you own or have any legal or equitable into	erest in any of the following items?	Current va portion you Do not deduct or exemption	u own?
6.	Household goods and furnishings			
	Examples: Major appliances, furniture, linens,	china, kitchenware		
	□ No		_	
	Yes. Describe appliances, furn	iture, kitchenware	\$	7,500.00
	,	<u> </u>		
7.	Electronics			
	•	eo, stereo, and digital equipment; computers, printers, scanners; music		
	collections; electronic devices incli	uding cell phones, cameras, media players, games		
	□ No			
	Yes. Describe televisions, radio	os, computers, cell phones	\$	1,500.00
	Collectibles of value			
		prints, or other artwork; books, pictures, or other art objects;		
	stamp, coin, or baseball card colle	ctions; other collections, memorabilia, collectibles		
			<b>—</b>	12 500 00
	Yes. Describe antiques, paintin	ngs, prints, books	\$	12,500.00
0	Equipment for sports and hobbies			
	• • •	nd other hobby equipment; bicycles, pool tables, golf clubs, skis; canoes		
	and kayaks; carpentry tools; music			
	□ No			
	Yes. Describe bicycles			3,000.00
	bicycles		\$	3,000.00
10	). Firearms			
	Examples: Pistols, rifles, shotguns, ammunition	on, and related equipment		
	□ No	on, and related equipment		
	Yes. Describe pistols, rifles		\$	2,500.00
	pistois, mics		Φ	2,000.00
11.	. Clothes			
	Examples: Everyday clothes, furs, leather coa	ats, designer wear, shoes, accessories		
	□ No			
	✓ Yes. Describe clothes, coats, s	shoes	\$	1,000.00
12.	2. Jewelry			
	examples: Everyday jewelry, costume jewelry gold, silver	v, engagement rings, wedding rings, heirloom jewelry, watches, gems,		
	<b>o</b> ,			
	No No Deceribe		\$	10,000.00
	Yes. Describejewelry, rings, w	ratches	Φ	
13.	3. Non-farm animals			
	Examples: Dogs, cats, birds, horses			
	□ No			
	✓ Yes Describe		\$	100.00
	dogs		Ψ	
14.	Any other personal and household items y	ou did not already list, including any health aids you did not list		
	☑ No			
	☐ Yes. Give specific		•	
	information		\$	
15	Add the dollar value of all of your entries for	rom Part 3, including any entries for pages you have attached		20 400 00
			\$	38,100.00

Debtor 1

### **Describe Your Financial Assets**

Do you own or have	any legal or equitable interest in	any of the following?		portion y	value of the vou own? duct secured claims ons.
	you have in your wallet, in your hon	ne, in a safe deposit box, and on hand when yo	ou file your petition		
☐ No ☑ Yes			Cash:	. \$	100.00
	ng, savings, or other financial accοι	unts; certificates of deposit; shares in credit uni ultiple accounts with the same institution, list e		5,	
☐ No ☑ Yes		Institution name:			
	17.1. Checking account:	Wells Fargo		\$	780.00
	17.2. Checking account:			\$	
	17.3. Savings account:	Wells Fargo		\$	35,000.00
	17.4. Savings account:			- \$	
	17.5. Certificates of deposit:			\$	
	17.6. Other financial account:				
	17.7. Other financial account:			\$	
	17.8. Other financial account:				
	17.9. Other financial account:				
40 Banda mutual fruit					
Examples: Bond fu	nds, or publicly traded stocks nds, investment accounts with brok	erage firms, money market accounts			
<ul><li>✓ No</li><li>✓ Yes</li></ul>	Institution or issuer name:				
				\$	
				_	
				_ \$	
	ed stock and interests in incorpo nip, and joint venture	rated and unincorporated businesses, incl	uding an interest in		
☐ No	Name of entity:		% of ownership:		
Yes. Give spec				\$	1.00
information abo	" Hanlan Midaatta Cariv	en. LP	100% %	¢.	750,000.00
information abo	Hanlan Midgette Scriven, Inc.		100% %	Φ	1.00

 Case 22-11818-amc
 Doc 28
 Filed 07/28/22
 Entered 07/28/22 22:22:35
 Desc Main

 Keith
 M.
 Scriven Document
 Page 7 of 3Qe number (if known) 22 - 11818 AMC

Debtor 1

20.	Negotiable instruments i	orate bonds and other negotiable and non-negotiable instruments nclude personal checks, cashiers' checks, promissory notes, and money orders. ents are those you cannot transfer to someone by signing or delivering them.	
	✓ No ☐ Yes. Give specific	Issuer name:	
	information about them		\$
			\$
			\$
21.	Retirement or pension  Examples: Interests in IF  No  Yes. List each	accounts RA, ERISA, Keogh, 401(k), 403(b), thrift savings accounts, or other pension or profit-sharing plans	
	account separately.	Type of account: Institution name:	
		401(k) or similar plan:	\$
		Pension plan:	\$
		IRA:	\$
		Retirement account:	\$
		Keogh:	\$
		Additional account:	\$
		Additional account:	\$
		deposits you have made so that you may continue service or use from a company with landlords, prepaid rent, public utilities (electric, gas, water), telecommunications	
	Yes	Institution name or individual:	
		Electric:	\$
		Gas:	\$
		Heating oil:	\$
		Security deposit on rental unit:	\$
		Prepaid rent:  Telephone:	\$
		Water:	\$
		Rented furniture:	\$
		Other:	\$ \$
			Ψ
23.	Annuities (A contract for No	r a periodic payment of money to you, either for life or for a number of years)	
	☐ Yes	Issuer name and description:	
			\$
			\$
			\$

Case 22-11818-amc Doc 28 Filed 07/28/22 Entered 07/28/22 22:22:35 Desc Main

Debtor 1 Keltn First Name		Last Name	nt Page 8 of	Salge number (if known) ZZ - 11818 A	AIVIC
24. Interests in an education 26 U.S.C. §§ 530(b)(1), 52			E program, or under a	a qualified state tuition program.	
Yes	······ Institution na	me and description. Se	eparately file the record	ds of any interests.11 U.S.C. § 521(	c):
					\$
					\$
					\$
25. Trusts, equitable or futu exercisable for your ber		perty (other than any	thing listed in line 1),	and rights or powers	
☑ No					
Yes. Give specific information about ther	m				\$
26. <b>Patents, copyrights, trac</b> <i>Examples</i> : Internet domai				ments	
☑ No					
Yes. Give specific information about ther	m				\$
27. <b>Licenses, franchises, ar</b>	nd other general in	ntangibles			
	ts, exclusive licens	es, cooperative associ	ation holdings, liquor lic	censes, professional licenses	
<ul><li>✓ No</li><li>✓ Yes. Give specific</li></ul>					
information about ther	n				\$
Money or property owed to	you?				Current value of the portion you own? Do not deduct secured claims or exemptions.
28. Tax refunds owed to you	ı				
No					
Yes. Give specific info about them, inclu	iding whether			Federal:	\$
you already filed and the tax years				State:	\$
				Local:	\$
29. <b>Family support</b> Examples: Past due or lur  ✓ No	mp sum alimony, s <sub>l</sub>	oousal support, child su	upport, maintenance, d	ivorce settlement, property settleme	ent
☐ Yes. Give specific info	ormation			A.:	Φ.
				Alimony:  Maintenance:	\$ \$
				Support:	\$ \$
				Divorce settlement:	\$
				Property settlement:	\$
	, disability insuranc	ee payments, disability oans you made to som		ation pay, workers' compensation,	
☑ No	_				
Yes. Give specific info	rmation				

 Case 22-11818-amc
 Doc 28
 Filed 07/28/22
 Entered 07/28/22
 22:22:35
 Desc Main

 Keith
 M.
 Scriven Document
 Page 9 of 3Qe number (if known)
 22 - 11818 AMC

Debtor 1

	Interests in insurance policies  Examples: Health, disability, or life insurance  Mo	e; health savings account (HSA)	; credit, homeowner's, or renter's insurance	
	Yes. Name the insurance company	Company name:	Beneficiary:	Surrender or refund value:
	of each policy and list its value			\$
				\$
				\$
	property because someone has died.  No		nce policy, or are currently entitled to receive	
	Yes. Give specific information			\$
	Claims against third parties, whether or r Examples: Accidents, employment disputes  No  Yes. Describe each claim.			\$
	Other contingent and unliquidated claims to set off claims  Mo	of every nature, including co	unterclaims of the debtor and rights	
	Yes. Describe each claim			\$
	Any financial assets you did not already I  No  Yes. Give specific information			\$
	Add the dollar value of all of your entries for Part 4. Write that number here		_	\$785,882.00
Pa	rt 5: Describe Any Business-R	elated Property You Ov	vn or Have an Interest In. List any r	eal estate in Part 1.
37.	Do you own or have any legal or equitable	e interest in any business-rela	ited property?	
	No. Go to Part 6.			
	Yes. Go to line 38.			
				Current value of the portion you own?  Do not deduct secured claims or exemptions.
38.	Accounts receivable or commissions you	already earned		
	□ No □ Yes. Describe			\$
	Office equipment, furnishings, and suppl Examples: Business-related computers, software,		ines, rugs, telephones, desks, chairs, electronic devices	_
	Yes. Describe			\$
				Ψ

 Case 22-11818-amc
 Doc 28
 Filed 07/28/22
 Entered 07/28/22
 22:22:35
 Desc Main

 Keith
 M.
 Scriven Document
 Page 10 of 30 number (if known) 22 - 11818 AMC

Debtor 1

40. Machinery, fixtures, e	equipment, supplies you use in business, and tools of your trade		
☐ No			-
☐ Yes. Describe			\$
41. Inventory			
☐ No ☐ Yes. Describe			
Yes. Describe			\$
40 Interests in neutronal	sing on laint vantuur		
42. Interests in partnersh	ips or joint ventures		
Yes. Describe	Name of entity:	% of ownership:	
	Marie of Charty.	%	\$
		%	\$
		%	\$
43. Customer lists, mailing	ng lists, or other compilations		
	include personally identifiable information (as defined in 11 U.S.C. § 101(41A	))?	
☐ No			
☐ Yes. Des	cribe		\$
			Φ
44. Any business-related	property you did not already list		
☐ No			
Yes. Give specific information			\$
mornation			\$
			\$
			\$
			\$
			\$
			Ψ
	of all of your entries from Part 5, including any entries for pages you have att number here		\$
ion i ditto i iiiti di di			
	ny Farm- and Commercial Fishing-Related Property You Own or Ha	ve an Interest In	
If you own o	r have an interest in farmland, list it in Part 1.		
46 Do you own or have	any legal or equitable interest in any farm- or commercial fishing-related prop	nerty?	
No. Go to Part 7.	any logar of equitable interest in any faring of commercial historial related prop	icity.	
☐ Yes. Go to line 47.			
			Current value of the
			portion you own?  Do not deduct secured claims
a Famous I			or exemptions.
47. <b>Farm animals</b> Examples: Livestock.	poultry, farm-raised fish		
No	y,		
☐ Yes			1
			\$

 
 Case 22-11818-amc
 Doc 28
 Filed 07/28/22
 Entered 07/28/22
 22:22:35
 Desc Main

 Keith
 M.
 ScrivenDocument
 Page 11 of 30 number (if known)
 22 - 11818 AMC
 Debtor 1

48. Crops—either growing or harvested		
☐ No ☐ Yes. Give specific information		\$
49. Farm and fishing equipment, implements, machinery, fixture	es, and tools of trade	_
☐ Yes		\$
50. Farm and fishing supplies, chemicals, and feed		
☐ Yes		\$
51. Any farm- and commercial fishing-related property you did i	not already list	
Yes. Give specific information		\$
52. Add the dollar value of all of your entries from Part 6, include for Part 6. Write that number here		\$
Part 7: Describe All Property You Own or Have	an Interest in That You Did Not List Above	
53. Do you have other property of any kind you did not already Examples: Season tickets, country club membership	list?	
☑ No		\$
Yes. Give specific information		\$
		\$
54. Add the dollar value of all of your entries from Part 7. Write	that number here	\$
Part 8: List the Totals of Each Part of this Form	n	
55. Part 1: Total real estate, line 2	<b>→</b>	\$2,818,350.00
56. Part 2: Total vehicles, line 5	\$8,600.00	
57. Part 3: Total personal and household items, line 15	\$38,100.00	
58. Part 4: Total financial assets, line 36	\$785,882.00	
59. Part 5: Total business-related property, line 45	\$	
60. Part 6: Total farm- and fishing-related property, line 52	\$	
61. Part 7: Total other property not listed, line 54	+\$	
62. <b>Total personal property.</b> Add lines 56 through 61	. \$\\\ 832,582.00 \\ Copy personal property total →	+\$832,582.00
63. <b>Total of all property on Schedule A/B.</b> Add line 55 + line 62		\$3,650,932.00

Case 22-11818-amc Doc 28 Filed 07/28/22 Entered 07/28/22 22:22:35 Desc Mai Document Page 12 of 30

Fill in this information to identify your case:					
Debtor 1	Keith	M.	Scriven		
Doblor 1	First Name	Middle Name	Last Name		
Debtor 2					
(Spouse, if filing)	First Name	Middle Name	Last Name		
United States Bankruptcy Court for the: Eastern District of Pennsylvania					
Case number	22 - 11818	AMC			
(If known)					

☐ Check if this is an amended filing

#### Official Form 106C

## Schedule C: The Property You Claim as Exempt

04/22

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

P	Part 1: Identify the Property You Claim as Exempt							
	✓ You are clai	ming state and federal nonband ming federal exemptions. 11 U	kruptcy exemptions. 11 I.S.C. § 522(b)(2)	• •				
۷.	For any proper	ty you list on Schedule A/B ti	nat you claim as exem	pt, fill in the information below.				
		on of the property and line on that lists this property	Current value of the portion you own	Amount of the exemption you claim	Specific laws that allow exemption			
			Copy the value from Schedule A/B	Check only one box for each exemption.				
	Brief description:	residence	\$ <u>769,100.00</u>	<b>Ø</b> \$ <u>13,950.00</u>	522(d)(1)			
	Line from Schedule A/B:	<u>A</u>		☐ 100% of fair market value, up to any applicable statutory limit	· · · · · · · · · · · · · · · · · · ·			
	Brief description:	automobile	\$8,600.00	<ul> <li>         √ \$ 4,450.00     </li> <li>         100% of fair market value, up to any applicable statutory limit     </li> </ul>	522(d)(2)			
	Line from Schedule A/B:	B						
	Brief description:	hshld gds & frnshg	\$22,500.00	<b>☑</b> \$ <u>14,875.00</u>	522(d)(3)			
	Line from Schedule A/B:	B		☐ 100% of fair market value, up to any applicable statutory limit	· 			
3.	Are you claimi	ng a homestead exemption o	f more than \$189,050?					
	` ,	stment on 4/01/25 and every 3	years after that for case	es filed on or after the date of adjustment.	)			
	<b>☑</b> No							
	Yes. Did you	u acquire the property covered	by the exemption within	1,215 days before you filed this case?				
	☐ No							
	Yes							

 Case 22-11818-amc
 Doc 28
 Filed 07/28/22
 Entered 07/28/22
 22:22:35
 Desc Main

 Keith
 M.
 Scriven
 Document
 Page 13 of 30 case number (if known)
 22 - 11818 AMC

Debtor 1

#### **Additional Page**

Brief description of the property and line on <i>Schedule A/B</i> that lists this property		Current value of the portion you own	Amount of the exemption you claim	Specific laws that allow exemption
		Copy the value from Schedule A/B	Check only one box for each exemption	
Brief description: Line from Schedule A/B:	jewelry B	\$10,000.00		522(d)(4)
Brief description: Line from Schedule A/B:	other property  B	\$791,482.00	■ 15,425.00 ■ 100% of fair market value, up to any applicable statutory limit	522(d)(5)
Brief description: Line from Schedule A/B:		\$	\$  100% of fair market value, up to any applicable statutory limit	
Brief description: Line from Schedule A/B:		\$	\$ \$100% of fair market value, up to any applicable statutory limit	
Brief description: Line from Schedule A/B:		\$	\$ \$ 100% of fair market value, up to any applicable statutory limit	
Brief description: Line from Schedule A/B:		\$	\$ 100% of fair market value, up to any applicable statutory limit	
Brief description: Line from Schedule A/B:		\$	\$  100% of fair market value, up to any applicable statutory limit	
Brief description: Line from Schedule A/B:		\$	\$ \$ any applicable statutory limit	
Brief description: Line from Schedule A/B:		\$	\$  100% of fair market value, up to any applicable statutory limit	
Brief description: Line from Schedule A/B:		\$	\$  100% of fair market value, up to any applicable statutory limit	
Brief description: Line from Schedule A/B:		\$	\$ 100% of fair market value, up to any applicable statutory limit	
Brief description: Line from Schedule A/B:		\$	\$ 100% of fair market value, up to any applicable statutory limit	

## Case 22-11818-amc Doc 28 Filed 07/28/22 Entered 07/28/22 22:22:35 Desc Main Document Page 14 of 30

Fill in this information to identify your case:						
Debtor 1	Keith	M.	Scriven			
20210	First Name	Middle Name	Last Name			
Debtor 2						
(Spouse, if filing)	First Name	Middle Name	Last Name			
United States Bankruptcy Court for the: Eastern District of Pennsylvania						
Case number	22 - 11818 A	AMC				
(If known)						

☐ Check if this is an amended filing

#### Official Form 106D

### Schedule D: Creditors Who Have Claims Secured by Property

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the Additional Page, fill it out, number the entries, and attach it to this form. On the top of any additional pages, write your name and case number (if known).

- 1. Do any creditors have claims secured by your property?
  - No. Check this box and submit this form to the court with your other schedules. You have nothing else to report on this form.
  - Yes. Fill in all of the information below.

2.1   Ajax Mortgage Loan Trust   Describe the property that secures the claim: \$ 483,505.00 \$ 769,100.00 \$	for each claim. If more than one creditor h	nore than one secured claim, list the creditor separately as a particular claim, list the other creditors in Part 2. labelical order according to the creditor's name.	Column A  Amount of claim  Do not deduct the value of collateral.	Column B Value of collateral that supports this claim	Column C Unsecured portion If any
1007 North 6th Street   19123 (1st mrtg)	2.1 Ajax Mortgage Loan Trust	Describe the property that secures the claim:	\$483,505.00	\$_769,100.00	\$
Contingent Unliquidated Who owes the debt? Check one. Who owes the debt? Check one. Debtor 1 only Debtor 2 only At least one of the debtors and another Creditor's Name 1661 Worthington Road Number 5 Street West Palm Beach, FL 33409 Who owes the debt? Check one.  West Palm Beach, FL 33409 Debtor 1 only Debtor 1 only Debtor 2 only Debtor 2 only Debtor 1 only City State ZiP Code Who owes the debt? Check one.  West Palm Beach of the debtors and another Debtor 1 only Debtor 2 only Debtor 1 only Debtor 2 only Debtor 1 only Debtor 2 only Debtor 2 on	9400 SW Beaverton	1007 North 6th Street 19123 (1st mrtg)			
Who owes the debt? Check one.    Debtor 1 only		☐ Contingent ☐ Unliquidated			
Debtor 1 only Debtor 2 only Debtor 2 only Debtor 3 and Debtor 2 only Debtor 4 and Debtor 3 and Debtor 2 only Debtor 5 and Debtor 3 and Debtor 4 and Debtor 3 and Debtor 4 and Debtor 3 and Debtor 4 and Debtor 4 and Debtor 5 and		<b>✓</b> Disputed			
Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim relates to a community debt Date debt was incurred Debtor 1 and Debtor 2 only Deutsche Bank National Trust Creditor's Name 1661 Worthington Road Number Street West Palm Beach, FL 33409 City State ZiP Code Who owes the debt? Check one.  Who owes the debt? Check one.  Debtor 1 only Debtor 2 only Debtor 1 only Debtor 2 only Debtor 1 only Debtor 2 only Debtor 1 only Debtor 2 only Debtor 3 only Debtor 4 only Debtor 4 only Debtor 5 only Debtor 6 only Debtor 6 only Debtor 8 only Debtor 9 only Debtor 9 only Debtor 1 only Debtor 9 only Debtor 1 only Debtor 2 only Debtor 1 only Debtor 2 only Debtor 2 only Debtor 2 only Debtor 2 only Debtor 3 only Debtor 4 only Debtor 4 only Debtor 4 only Debtor 5 only Debtor 5 only Debtor 6 only Debtor 7 only Debtor 8 only Debtor 9 only Debtor 1 onl	Who owes the debt? Check one.	Nature of lien. Check all that apply.			
Deutsche Bank National Trust  Creditor's Name 1661 Worthington Road Number Street  West Palm Beach, FL 33409  City State ZIP Code  Who owes the debt? Check one.  Describe the property that secures the claim:  \$995,980.00 \$814,200.00 \$  As of the date you file, the claim is: Check all that apply.  Contingent Unliquidated Disputed  Nature of lien. Check all that apply.  An agreement you made (such as mortgage or secured car loan)  Statutory lien (such as tax lien, mechanic's lien)  Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim relates to a community debt  Date debt was incurred 01/20/2005  Last 4 digits of account number 6 2 1  Last 4 digits of account number 6 2 1  Last 4 digits of account number 6 2 1	Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim relates to a	car loan)  Statutory lien (such as tax lien, mechanic's lien)  Judgment lien from a lawsuit  Other (including a right to offset)	-		
Deutscrie Bank National Trust Creditor's Name 1661 Worthington Road Number Street  West Palm Beach, FL 33409  City State ZIP Code  Who owes the debt? Check one.  Wast Palm Beach and Tube state ZIP Code  Who owes the debt? Check one.  As of the date you file, the claim is: Check all that apply.  Contingent Unliquidated  Disputed  Nature of lien. Check all that apply.  An agreement you made (such as mortgage or secured car loan) Statutory lien (such as tax lien, mechanic's lien)  Judgment lien from a lawsuit Other (including a right to offset)  Last 4 digits of account number 6 2 1  Last 4 digits of account number 6 2 1		Last 4 digits of account number 5 3 9			
1661 Worthington Road Number Street  West Palm Beach, FL 33409  City State ZIP Code  Who owes the debt? Check one.  ✓ Debtor 1 only □ Debtor 2 only □ Debtor 1 and Debtor 2 only □ At least one of the debtors and another □ Check if this claim relates to a community debt  Date debt was incurred 01/20/2005  Vest Palm Beach, FL 33409  As of the date you file, the claim is: Check all that apply. □ Contingent □ Unliquidated ☑ Disputed  Nature of lien. Check all that apply. □ An agreement you made (such as mortgage or secured car loan) □ Statutory lien (such as tax lien, mechanic's lien) □ Judgment lien from a lawsuit □ Other (including a right to offset) □ Last 4 digits of account number 6 2 1 1	Deutsche Bank National Trust	Describe the property that secures the claim:	\$995,980.00	\$_814,200.00	\$
City State ZIP Code  Who owes the debt? Check one.  Who pebtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another  Check if this claim relates to a community debt  Date debt was incurred 01/20/2005  Contingent Unliquidated Disputed  Nature of lien. Check all that apply.  An agreement you made (such as mortgage or secured car loan) Statutory lien (such as tax lien, mechanic's lien) Judgment lien from a lawsuit Other (including a right to offset)  Last 4 digits of account number 6 2 1	1661 Worthington Road	25 Fire Island Blvd 11782 (1st mrtg)			
Who owes the debt? Check one.  Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another  Check if this claim relates to a community debt Date debt was incurred 01/20/2005  Nature of lien. Check all that apply.  An agreement you made (such as mortgage or secured car loan) Statutory lien (such as tax lien, mechanic's lien) Judgment lien from a lawsuit Other (including a right to offset)  Last 4 digits of account number 6 2 1 1		☐ Contingent ☐ Unliquidated			
Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only An agreement you made (such as mortgage or secured car loan) Statutory lien (such as tax lien, mechanic's lien) At least one of the debtors and another Check if this claim relates to a community debt Date debt was incurred 01/20/2005  Last 4 digits of account number 6 2 1	Who owes the debt? Check one	·			
□ Debtor 2 only □ Debtor 1 and Debtor 2 only □ At least one of the debtors and another □ Check if this claim relates to a community debt Date debt was incurred 01/20/2005					
□ Debtor 1 and Debtor 2 only □ At least one of the debtors and another □ Check if this claim relates to a community debt Date debt was incurred 01/20/2005 □ Statutory lien (such as tax lien, mechanic's lien) □ Judgment lien from a lawsuit □ Other (including a right to offset) □ Last 4 digits of account number 6 2 1	1				
Check if this claim relates to a community debt  Date debt was incurred 01/20/2005  Last 4 digits of account number 6 2 1					
□ Check if this claim relates to a community debt  Date debt was incurred 01/20/2005 Last 4 digits of account number 6 2 1	At least one of the debtors and another	Judgment lien from a lawsuit			
Date debt was incurred 01/20/2005 Last 4 digits of account number 6 2 1	community debt	Other (including a right to offset)	-		
	Date debt was incurred 01/20/2009	Last 4 digits of account number 6 2 1			
Add the dollar value of your entries in Column A on this page. Write that number here: \$\(\frac{1}{479,485.00}\)		Column A on this page. Write that number here:	\$_1,479,485.00		

Doc 28 Filed 07/28/22 Entered 07/28/22 22:22:35 Desc Main Case 22-11818-amc Document Page 15 of 30

Case number (if known) 22 - 11818 AMC Keith M. Debtor 1

First Name

Middle Name

Additional Page		Column A	Column B	Column C
Part 1: Additional Page  After listing any entries on this p by 2.4, and so forth.	age, number them beginning with 2.3, followed	Amount of claim Do not deduct the value of collateral.	Value of collateral that supports this claim	Unsecured portion
2.3 Fay Servicing, LLC	Describe the property that secures the claim:	\$266,445.00	\$288,966.00 <sub>\$</sub>	
Creditor's Name 440 So. LaSalle Street	324 Queen Street, Unit #B			
Number Street	324 Queen Street, Ont # B			
	As of the date you file, the claim is: Check all that apply.			
Chicago, IL 60605	Contingent			
City State ZIP Code	Unliquidated Disputed			
Who owes the debt? Check one.	Nature of lien. Check all that apply.			
☐ Debtor 1 only ☐ Debtor 2 only	An agreement you made (such as mortgage or secured car loan)			
☐ Debtor 2 only ☐ Debtor 1 and Debtor 2 only	Statutory lien (such as tax lien, mechanic's lien)			
At least one of the debtors and another	☐ Judgment lien from a lawsuit ☐ Other (including a right to offset)			
Check if this claim relates to a community debt	Other (including a right to offset)			
Date debt was incurred 01/27/2012	Last 4 digits of account number			
2.4 J. Otis Smith	Describe the property that secures the claim:	\$100,000.00	\$185,000.00 <sub>\$</sub>	
P.O. Box 8222	1009 North 6th Street 19123			
Number Street				
	As of the date you file, the claim is: Check all that apply.  Contingent			
Philadelphia, PA 19101	Unliquidated			
City State ZIP Code  Who owes the debt? Check one.	Disputed			
Debtor 1 only	Nature of lien. Check all that apply.			
Debtor 2 only	An agreement you made (such as mortgage or secured car loan)			
Debtor 1 and Debtor 2 only	Statutory lien (such as tax lien, mechanic's lien)			
☐ At least one of the debtors and another	☐ Judgment lien from a lawsuit ☐ Other (including a right to offset)			
Check if this claim relates to a community debt	Other (including a right to onset)			
Date debt was incurred11/11/0200	Last 4 digits of account number			
TD Bank, N.A. Creditor's Name	Describe the property that secures the claim:	\$175,000.00	\$_761,100.00	
70 Gray Road	25 Fire I.B. and 341A Shell Wlk (2nd mrtg)			
Number Street				
	As of the date you file, the claim is: Check all that apply.			
Fairmouth, ME 04105 City State ZIP Code	☐ Contingent ☐ Unliquidated			
,	✓ Disputed			
Who owes the debt? Check one.	Nature of lien. Check all that apply.			
Debtor 1 only	An agreement you made (such as mortgage or secured			
☐ Debtor 2 only ☐ Debtor 1 and Debtor 2 only	car loan)  Statutory lien (such as tax lien, mechanic's lien)			
At least one of the debtors and another	Judgment lien from a lawsuit			
☐ Check if this claim relates to a community debt	Other (including a right to offset)			
Date debt was incurred 01/14/2013	Last 4 digits of account number 3 3			
Add the dollar value of your entries	in Column A on this page. Write that number here:	\$541,445.00		
If this is the last page of your form, Write that number here:	add the dollar value totals from all pages.	\$_2,504,630.00		

# UNITED STATES BANKRUPTCY COURT for the Eastern District of Pennsylvania

:

In re : Case No. 22 - 11818

Keith M. Scriven : (Chapter 11)

Debtor. :

Hon. Ashely M. Chan

:

### Addendum to Schedule D

Part 1	: Secured Claims			
2.1)	Ajax Mortgage Loan Trust 9400 SW Beaverton Beaverton, OR 97005	1007 No. 6 <sup>th</sup> Debtor	disputed 1 <sup>st</sup> mrtg 11/11/2005	\$483,505.00 x - x - 8539
2.2)	Deutsche Bank Nat'l Trust 1661 Worthington Rd West Palm Beach, FL 33409	Debtor	disputed mrtg 1/20/2009	\$995,980.00 x - x - 6621
2.3)	Fay Servicing, LLC 440 So. LaSalle Str Chicago, IL 60605	324 Queen joint	disputed mrtg 1/27/2012	\$266,445.00 x - x -
2.4)	J. Otis Smith P.O. Box 8222 Philadelphia, PA 19101	1009 No. 6th Debtor	disputed mrtg 1/14/2009	\$100,000.00 x - x -
2.5)	TD Bank, N.A. 70 Gray Road Fairmouth, ME 04105	25 Fire Islnd Debtor	disputed 2 <sup>nd</sup> mrtg 12/05/2003	\$175,000.00 x - x - 9033
2.6)	U.S. Bank, N.A. 14841 Dallas Pkwy Dallas, TX 75254	341A Shell Debtor	disputed mrtg 4/26/2002	\$417,740.00 x - x - 6709
2.7)	Bank of America 9400 SW Beaverton Beaverton, OR 97005	1007 No. 6 <sup>th</sup> Debtor	disputed 2 <sup>nd</sup> mrtg 11/21/2013	\$65,960.00 x - x - 9256

\$2,504,630.00

Case 22-11818-amc Doc 28 Filed 07/28/22 Entered 07/28/22 22:22:35 Desc Main of 30

Fill in this in	formation to ide	ntify your case:		
Debtor 1	Keith	M.	Scriven	
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse, if filing)	First Name	Middle Name	Last Name	
United States F	Bankruptcy Court for	r the: Eastern District of F	Pennsylvania	
Case number	22 - 11818 A	MC		
(If known)				

#### Official Form 106E/F

#### Schedule E/F: Creditors Who Have Unsecured Claims

12/15

Be as complete and accurate as possible. Use Part 1 for creditors with PRIORITY claims and Part 2 for creditors with NONPRIORITY claims. List the other party to any executory contracts or unexpired leases that could result in a claim. Also list executory contracts on Schedule A/B: Property (Official Form 106A/B) and on Schedule G: Executory Contracts and Unexpired Leases (Official Form 106G). Do not include any creditors with partially secured claims that are listed in Schedule D: Creditors Who Have Claims Secured by Property. If more space is needed, copy the Part you need, fill it out, number the entries in the boxes on the left. Attach the Continuation Page to this page. On the top of any additional pages, write your name and case number (if known).

Pa	rt 1: List All of Your PRIORITY Unsecur	red Claims			
1.	Do any creditors have priority unsecured claim  ☐ No. Go to Part 2.  ☑ Yes.	ns against you?			
2.	each claim listed, identify what type of claim it is. It nonpriority amounts. As much as possible, list the unsecured claims, fill out the Continuation Page of	reditor has more than one priority unsecured claim, list the factaim has both priority and nonpriority amounts, list the claims in alphabetical order according to the creditor's not part 1. If more than one creditor holds a particular claim instructions for this form in the instruction booklet.)	at claim here and ame. If you have	d show both pr more than two	iority and priority
	( · · · · · · · · · · · · · · · · · · ·	,	Total claim	Priority	Nonpriority
2.1	Internal Revenue Service Priority Creditor's Name P.O. Box 7346 Number Street Philadelphia, PA 19101  City State ZIP Code  Who incurred the debt? Check one.  ✓ Debtor 1 only □ Debtor 2 only □ Debtor 1 and Debtor 2 only □ At least one of the debtors and another □ Check if this claim is for a community debt  Is the claim subject to offset? ✓ No □ Yes	Last 4 digits of account number  When was the debt incurred?  As of the date you file, the claim is: Check all that apply Contingent Unliquidated  Disputed  Type of PRIORITY unsecured claim: Domestic support obligations  Taxes and certain other debts you owe the government Claims for death or personal injury while you were intoxicated  Other. Specify		amount \$_2,180.00	amount \$
2.2	Pennsylvania Dept of Revenue Priority Creditor's Name P.O. Box 280946 Number Street Harrisburg, PA 17128  City State ZIP Code  Who incurred the debt? Check one.  Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt  Is the claim subject to offset?	Last 4 digits of account number	<i>i</i> .	\$ 1,635.00	\$
	Is the claim subject to offset?  ✓ No  ☐ Yes	□ Otner. Specify	-		

Debtor 1

Case 22-11818 amc Dec 28 Filed 07/28/22 Entered 07/28/22 22:22:35 Desc Main First Name Middle Name Last Name Document Page 18 of 30 number (if known)

Par	t 1: Your PRIORITY Unsecured Claims	s — Continuation Page			
Afte	er listing any entries on this page, number them	beginning with 2.3, followed by 2.4, and so forth.	Total claim	Priority amount	Nonpriority amount
.3	Philadelphia Law Department Priority Creditor's Name	Last 4 digits of account number	\$ 57,325.0C	\$	\$ <u>57,325.00</u>
	1401 JFK Blvd	When was the debt incurred?			
	Number Street Philadelphia, PA 19102	As of the date you file, the claim is: Check all that apply.			
		Contingent			
	City State ZIP Code	☐ Unliquidated ☐ Disputed			
	Who incurred the debt? Check one.  Debtor 1 only	Type of PRIORITY unsecured claim:			
	☐ Debtor 2 only ☐ Debtor 1 and Debtor 2 only	Domestic support obligations			
	At least one of the debtors and another	<ul><li>✓ Taxes and certain other debts you owe the government</li><li>☐ Claims for death or personal injury while you were</li></ul>			
	$oxedsymbol{\square}$ Check if this claim is for a community debt	intoxicated  Other. Specify			
	Is the claim subject to offset?				
	₩ No □ Yes				
	Priority Creditor's Name	Last 4 digits of account number	\$	\$	\$
		When was the debt incurred?			
	Number Street	As of the date you file, the claim is: Check all that apply.			
		☐ Contingent			
	City State ZIP Code	☐ Unliquidated☐ Disputed			
	Who incurred the debt? Check one.				
	☐ Debtor 1 only ☐ Debtor 2 only	Type of PRIORITY unsecured claim:			
	Debtor 1 and Debtor 2 only	Domestic support obligations			
	At least one of the debtors and another	Taxes and certain other debts you owe the government			
	☐ Check if this claim is for a community debt	<ul> <li>Claims for death or personal injury while you were intoxicated</li> <li>Other. Specify</li> </ul>			
	Is the claim subject to offset?				
	□ No □ Yes				
	2	Last 4 digits of account number	\$	\$	\$
	Priority Creditor's Name	When was the debt incurred?			
	Number Street	As of the date you file, the claim is: Check all that apply.			
		☐ Contingent			
	City State ZIP Code	☐ Unliquidated			
	Who incurred the debt? Check one.	☐ Disputed			
	Debtor 1 only	Type of PRIORITY unsecured claim:			
	Debtor 2 only				
	Debtor 1 and Debtor 2 only	Domestic support obligations			
	☐ At least one of the debtors and another	☐ Taxes and certain other debts you owe the government☐ Claims for death or personal injury while you were			
	☐ Check if this claim is for a community debt	intoxicated  Other. Specify			
	Is the claim subject to offset?				
	□ No ☑ Yes				

Pai	rt 2: List All of Your NONPRIOR	ITY Uns	ecured Claims			
	Do any creditors have nonpriority uns  No. You have nothing to report in this  Yes		•			
	nonpriority unsecured claim, list the credi	tor separator holds	ately for each clair	order of the creditor who holds each claim. If a creditor ham. For each claim listed, identify what type of claim it is. Do not list the other creditors in Part 3.If you have more than three not	t list c	laims already
					To	otal claim
4.1	Capital One Nonpriority Creditor's Name			Last 4 digits of account number	\$	4,565.00
	P.O. Box 30285			When was the debt incurred? 12/06/2015	Ψ	·
	Number Street		0.1.100	-		
	,	UT State	84130 ZIP Code	As of the date you file, the claim is: Check all that apply.		
				☐ Contingent		
	Who incurred the debt? Check one.			Unliquidated		
	Debtor 1 only			<b>☑</b> Disputed		
	Debtor 2 only Debtor 1 and Debtor 2 only			Type of NONPRIORITY unsecured claim:		
	☐ At least one of the debtors and another			☐ Student loans		
	☐ Check if this claim is for a communi	ity debt		Obligations arising out of a separation agreement or divorce		
	Is the claim subject to offset?			that you did not report as priority claims  Debts to pension or profit-sharing plans, and other similar debt	s	
	☑ No			✓ Other. Specify credit card  Other. Specify credit card  ✓ Other. Specify credit card  Other. Specify card  Other. Specify credit card  Other. Specify		
	Yes					
4.2	Credit One Bank			Last 4 digits of account number	\$	2,025.00
	Nonpriority Creditor's Name			When was the debt incurred?		
	6801 So. Cimarron Road			_		
	Number Street Las Vegas,	NV	89113	As of the date you file, the claim is: Check all that apply.		
		State	ZIP Code	Contingent		
	Who incurred the debt? Check one.			Unliquidated		
	Debtor 1 only			<b>☐</b> Disputed		
	☐ Debtor 2 only ☐ Debtor 1 and Debtor 2 only			Type of NONPRIORITY unsecured claim:		
	At least one of the debtors and another			☐ Student loans		
	☐ Check if this claim is for a communi	ity deht		Obligations arising out of a separation agreement or divorce		
	Is the claim subject to offset?	ity debt		that you did not report as priority claims  Debts to pension or profit-sharing plans, and other similar debt	s	
	✓ No			✓ Other. Specify credit card	-	
	☐ Yes					
4.3	OpenSky Capital Bank			Last 4 digits of account number		55.00
	Nonpriority Creditor's Name			When was the debt incurred? 10/07/2021	\$	33.00
	P.O. Box 8130 Number Street					
	Reston,	VA	20195	As of the date you file, the claim is: Check all that apply.		
	City	State	ZIP Code	_		
	Who incurred the debt? Check one.			<ul><li>☐ Contingent</li><li>☐ Unliquidated</li></ul>		
	Debtor 1 only			Disputed		
	☐ Debtor 2 only ☐ Debtor 1 and Debtor 2 only					
	☐ At least one of the debtors and another			Type of NONPRIORITY unsecured claim:		
	☐ Check if this claim is for a communi	ity debt		☐ Student loans ☐ Obligations arising out of a separation agreement or divorce		
	Is the claim subject to offset?	,		that you did not report as priority claims		
	✓ No			☐ Debts to pension or profit-sharing plans, and other similar debt☐ ☐ Other. Specify <u>Credit card</u>	S	
	Yes			- Juliel. Opeolity <u>Of Guit Garu</u>		

Debtor

Part 2:

# Case 22-11818 amc Dec 28 Filed 07/28/22 Entered 07/28/22 22:22:35 Pesc Main Page 20 of 18 number (if known) 22-11818 AMC Main Page 20 of 18 number (if known) 22-11818 AMC Main Page 20 of 18 number (if known) 22-11818 AMC Main Page 20 of 18 number (if known) 22-11818 AMC Main Page 20 of 18 number (if known) 22-11818 AMC Main Page 20 of 18 number (if known) 22-11818 AMC Main Page 20 of 18 number (if known) 22-11818 AMC Main Page 20 of 18 number (if known) 22-11818 AMC Main Page 20 of 18 number (if known) 22-11818 AMC Main Page 20 of 18 number (if known) 22-11818 AMC Main Page 20 of 18 number (if known) 22-11818 AMC Main Page 20 of 18 number (if known) 22-11818 AMC Main Page 20 of 18 number (if known) 22-11818 AMC Main Page 20 of 18 number (if known) 22-11818 AMC Main Page 20 of 18 number (if known) 22-11818 AMC Main Page 20 of 18 number (if known) 22-11818 AMC Main Page 20 of 18 number (if known) 22-11818 AMC Main Page 20 of 18 number (if known) 22-11818 AMC Main Page 20 of 18 number (if known) 22-11818 AMC Main Page 20 of 18 number (if known) 22-11818 AMC Main Page 20 of 18 number (if known) 22-11818 AMC Main Page 20 of 18 number (if known) 22-11818 AMC Main Page 20 of 18 number (if known) 22-11818 AMC Main Page 20 of 18 number (if known) 22-11818 AMC Main Page 20 of 18 number (if known) 22-11818 AMC Main Page 20 of 18 number (if known) 22-11818 AMC Main Page 20 of 18 number (if known) 22-11818 AMC Main Page 20 of 18 number (if known) 22-11818 AMC Main Page 20 of 18 number (if known) 22-11818 AMC Main Page 20 of 18 number (if known) 22-11818 AMC Main Page 20 of 18 number (if known) 22-11818 AMC Main Page 20 of 18 number (if known) 22-11818 AMC Main Page 20 of 18 number (if known) 22-11818 AMC Main Page 20 of 18 number (if known) 22-11818 AMC Main Page 20 of 18 number (if known) 22-11818 AMC Main Page 20 of 18 number (if known) 22-11818 AMC Main Page 20 of 18 number (if known) 22-11818 AMC Main Page 20 of 18 number (if known) 22-11818 AMC Main Page 20 of 18 number (if known) 22-11818 AMC Main Page 20 of 18 number

Your NONPRIORITY Unsecured Claims — Continuation Page

Afte	er listing any entries on this page, number the	n beginning with	n 4.4, followed by 4.5, and so forth.	Total claim
4.4	PECo Energy Nonpriority Creditor's Name		Last 4 digits of account number	\$ 265.00
	2301 Market Street		When was the debt incurred?	
	Number Street Philadelphia, PA	19103	As of the date you file, the claim is: Check all that apply.	
	City State	ZIP Code	Contingent	
	Who incurred the debt? Check one.		<ul><li>☐ Unliquidated</li><li>☑ Disputed</li></ul>	
	Debtor 1 only Debtor 2 only		Type of <b>NONPRIORITY</b> unsecured claim:	
	Debtor 1 and Debtor 2 only		Student loans	
	At least one of the debtors and another		<ul> <li>Obligations arising out of a separation agreement or divorce that you did not report as priority claims</li> </ul>	
	Check if this claim is for a community debt		Debts to pension or profit-sharing plans, and other similar debts	
	Is the claim subject to offset?  ✓ No		✓ Other. Specify electrical services	
	Yes			
4.5	Philadelphia Gas Works		Last 4 digits of account number	\$_5,560.00
	Nonpriority Creditor's Name 800 W. Montgomery Avenue		When was the debt incurred?	
	Number Street		— As of the date you file, the claim is: Check all that apply.	
	Philadelphia, PA	19122 ZIP Code	Contingent	
	•		Unliquidated	
	Who incurred the debt? Check one.  ✓ Debtor 1 only		✓ Disputed	
	Debtor 2 only		Type of NONPRIORITY unsecured claim:	
	☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another		Student loans	
	☐ Check if this claim is for a community debt		<ul> <li>Obligations arising out of a separation agreement or divorce that you did not report as priority claims</li> </ul>	
	Is the claim subject to offset?		☐ Debts to pension or profit-sharing plans, and other similar debts ☐ Other. Specify Gas services	
	₩ No		Other: Specify gas services	
4.6	☐ Yes			\$ 1.00
	Santander Consumer USA, Inc.		Last 4 digits of account number	*
	Nonpriority Creditor's Name P.O. Box 961245 Number Street		When was the debt incurred?	
	Fort Worth, TX	76161	As of the date you file, the claim is: Check all that apply.	
	City State	ZIP Code	☐ Contingent☐ Unliquidated	
	Who incurred the debt? Check one.		✓ Disputed	
	Debtor 1 only		Type of NONDRIORITY upper sure districts	
	☐ Debtor 2 only ☐ Debtor 1 and Debtor 2 only		Type of NONPRIORITY unsecured claim:	
	☐ At least one of the debtors and another		<ul><li>Student loans</li><li>Obligations arising out of a separation agreement or divorce that</li></ul>	
	$oldsymbol{\square}$ Check if this claim is for a community debt		you did not report as priority claims  Debts to pension or profit-sharing plans, and other similar debts	
	Is the claim subject to offset?  ✓ No  ☐ Yes		Other. Specify auto contract balance	

Debtor

Part 2:

# Case 22-11818 amc Dec 28 Filed 07/28/22 Entered 07/28/22 22:22:35 Pesc Main Page 21 of 18 number (if known) 22-11818 AMC Main Page 21 of 18 number (if known) 22-11818 AMC Main Page 21 of 18 number (if known) 22-11818 AMC Main Page 21 of 18 number (if known) 22-11818 AMC Main Page 21 of 18 number (if known) 22-11818 AMC Main Page 21 of 18 number (if known) 22-11818 AMC Main Page 21 of 18 number (if known) 22-11818 AMC Main Page 21 of 18 number (if known) 22-11818 AMC Main Page 21 of 18 number (if known) 22-11818 AMC Main Page 21 of 18 number (if known) 22-11818 AMC Main Page 21 of 18 number (if known) 22-11818 AMC Main Page 21 of 18 number (if known) 22-11818 AMC Main Page 21 of 18 number (if known) 22-11818 AMC Main Page 21 of 18 number (if known) 22-11818 AMC Main Page 21 of 18 number (if known) 22-11818 AMC Main Page 21 of 18 number (if known) 22-11818 AMC Main Page 21 of 18 number (if known) 22-11818 AMC Main Page 21 of 18 number (if known) 22-11818 AMC Main Page 21 of 18 number (if known) 22-11818 AMC Main Page 21 of 18 number (if known) 22-11818 AMC Main Page 21 of 18 number (if known) 22-11818 AMC Main Page 21 of 18 number (if known) 22-11818 AMC Main Page 21 of 18 number (if known) 22-11818 AMC Main Page 21 of 18 number (if known) 22-11818 AMC Main Page 21 of 18 number (if known) 22-11818 AMC Main Page 21 of 18 number (if known) 22-11818 AMC Main Page 21 of 18 number (if known) 22-11818 AMC Main Page 21 of 18 number (if known) 22-11818 AMC Main Page 21 of 18 number (if known) 22-11818 AMC Main Page 21 of 18 number (if known) 22-11818 AMC Main Page 21 of 18 number (if known) 22-11818 AMC Main Page 21 of 18 number (if known) 22-11818 AMC Main Page 21 of 18 number (if known) 22-11818 AMC Main Page 21 of 18 number (if known) 22-11818 AMC Main Page 21 of 18 number (if known) 22-11818 AMC Main Page 21 of 18 number (if known) 22-11818 AMC Main Page 21 of 18 number (if known) 22-11818 AMC Main Page 21 of 18 number (if known) 22-11818 AMC Main Page 21 of 18 number (if known) 22-11818 AMC Main Page 21 of 18 number

 ${\bf Your\ NONPRIORITY\ Unsecured\ Claims-Continuation\ Page }$ 

Afte	er listing any entries on this page, number ther	n beginning with	4.4, followed by 4.5, and so forth.	Total claim
4.7	William Whalon		Last 4 digits of account number	\$ 80,000.00
	Nonpriority Creditor's Name  138 North 2nd Street		When was the debt incurred?	
	Number Street Philadelphia, PA	19106	As of the date you file, the claim is: Check all that apply.	
	City State  Who incurred the debt? Check one.  ✓ Debtor 1 only  □ Debtor 2 only  □ Debtor 1 and Debtor 2 only  □ At least one of the debtors and another  □ Check if this claim is for a community debt  Is the claim subject to offset?  ✓ No  □ Yes	ZIP Code	<ul> <li>□ Contingent</li> <li>□ Unliquidated</li> <li>☑ Disputed</li> <li>Type of NONPRIORITY unsecured claim:</li> <li>□ Student loans</li> <li>□ Obligations arising out of a separation agreement or divorce that you did not report as priority claims</li> <li>□ Debts to pension or profit-sharing plans, and other similar debts</li> <li>☑ Other. Specify loan balance</li> </ul>	
			Last 4 digits of account number	\$
	Nonpriority Creditor's Name		When was the debt incurred?	
	Number Street		As of the date you file, the claim is: Check all that apply.	
	City State	ZIP Code	Contingent	
	Who incurred the debt? Check one.  Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset? No Yes		<ul> <li>☐ Unliquidated</li> <li>☐ Disputed</li> <li>Type of NONPRIORITY unsecured claim:</li> <li>☐ Student loans</li> <li>☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims</li> <li>☐ Debts to pension or profit-sharing plans, and other similar debts</li> <li>☐ Other. Specify</li> </ul>	
			Last 4 digits of account number	\$
	Nonpriority Creditor's Name		When was the debt incurred?	
	Number Street		As of the date you file, the claim is: Check all that apply.	
	City State	ZIP Code	Contingent Unliquidated	
	Who incurred the debt? Check one.		☐ Disputed	
	Debtor 1 only Debtor 2 only		Type of NONPRIORITY unsecured claim:	
	Debtor 1 and Debtor 2 only		☐ Student loans	
	At least one of the debtors and another		Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	☐ Check if this claim is for a community debt		Debts to pension or profit-sharing plans, and other similar debts	
	Is the claim subject to offset?  ☐ No ☐ Yes		Other. Specify	

Part 4:

#### Add the Amounts for Each Type of Unsecured Claim

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. § 159. Add the amounts for each type of unsecured claim.

			Total claim	
Total claims	6a. Domestic support obligations	6a.	\$	
from Part 1	6b. Taxes and certain other debts you owe the government	6b.	\$	61,140.00
	6c. Claims for death or personal injury while you were intoxicated	6c.	\$	
	6d. <b>Other.</b> Add all other priority unsecured claims. Write that amount here.	6d.	+ \$	
	6e. <b>Total.</b> Add lines 6a through 6d.	6e.	\$	61,140.00
			Total claim	
Total claims	6f. Student loans	6f.	\$	
from Part 2	6g. Obligations arising out of a separation agreement or divorce that you did not report as priority claims	6g.	\$	
	6h. Debts to pension or profit-sharing plans, and other similar debts	6h.	\$	
	6i. Other. Add all other nonpriority unsecured claims.		т.	92,471.00
	Write that amount here.	6i.	+ \$	

## Case 22-11818-amc Doc 28 Filed 07/28/22 Entered 07/28/22 22:22:35 Desc Main Document Page 23 of 30

Fill in this information to identify your case:							
Debtor	Keith	M.	Scriven				
	First Name	Middle Name	Last Name				
Debtor 2							
(Spouse If filing)	First Name	Middle Name	Last Name				
United States Bankruptcy Court for the: Eastern District of Pennsylvania							
Case number	22 - 11818 A	AMC					
(If known)							

☐ Check if this is an amended filing

#### Official Form 106G

### **Schedule G: Executory Contracts and Unexpired Leases**

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
  - No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
  - Yes. Fill in all of the information below even if the contracts or leases are listed on Schedule A/B: Property (Official Form 106A/B).
- 2. List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

	Person or	company with who	om you l	nave the contract or lease	State what the contract or lease is for
2.1					
	Name				-
	Number	Street			-
	City		State	ZIP Code	
2.2					_
	Name				
	Number	Street			_
	City		State	ZIP Code	-
2.3					
	Name				
	Number	Street			-
	City		State	ZIP Code	-
2.4					
	Name				
	Number	Street			-
	City		State	ZIP Code	-
2.5					
	Name				
	Number	Street			-
	City		State	ZIP Code	

Case 22-11818-amc Doc 28 Filed 07/28/22 Entered 07/28/22 22:22:35 Desc Main Document Page 24 of 30

Fill in this information to identify your case:							
Debtor 1	Keith First Name	M. Middle Name	Scriven				
Debtor 2	First Name	Middle Name	Last Name				
(Spouse, if filing)	First Name	Middle Name	Last Name				
United States Bankruptcy Court for the: Eastern District of Pennsylvania							
Case number (If known)	22 - 11818 AMC						

1. Do you have any codebtors? (If you are filing a joint case, do not list either spouse as a codebtor.)

☐ Check if this is an amended filing

#### Official Form 106H

#### **Schedule H: Your Codebtors**

12/15

Codebtors are people or entities who are also liable for any debts you may have. Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the Additional Page, fill it out, and number the entries in the boxes on the left. Attach the Additional Page to this page. On the top of any Additional Pages, write your name and case number (if known). Answer every question.

	☑ No ☑ Yes			
2. \		• •		(Community property states and territories include
	No. Go to line 3.	ana, Novada, Now Moxico, I	derio (100, 10xdo, 17do)	ington, and wisconsin.)
	Yes. Did your spouse, former	spouse, or legal equivalent	ive with you at the time?	
	☐ No			
	Yes. In which community	state or territory did you live?	? F	Fill in the name and current address of that person.
	Name of your spouse, former sp	ouse, or legal equivalent		
	Number Street			
	City	State	ZIP Code	
3. <b>l</b> ı	n Column 1, list all of your cod	lebtors. Do not include you	r spouse as a codebtor i	if your spouse is filing with you. List the person
	shown in line 2 again as a code	ebtor only if that person is	a guarantor or cosigner.	Make sure you have listed the creditor on
	Schedule E/F, or Schedule G to	,,	orm 106E/F), or Schedule	e G (Official Form 106G). Use <i>Schedule D,</i>
	Column 1: Your codebtor			Column 2: The creditor to whom you owe the debt
				Check all schedules that apply:
3.1	Staci J. Brookstein			☑ Schedule D, line 2.3
	Name 324 - B Queen Street			Schedule E/F, line
	Number Street			Schedule G, line
	Philadelphia,	PA State	19147 ZIP Code	
3.2	Gity	State	ZIF Code	
<u> </u>	Name			Schedule D, line
				☐ Schedule E/F, line
	Number Street			☐ Schedule G, line
	City	State	ZIP Code	
3.3				Schedule D, line
	Name	-		Schedule E/F, line
	Number Street			Schedule G, line
	City	State	ZIP Code	
	Oity	State	ZIF Coue	

# 

Fill in this information to identify	your case:		
Debtor 1 Keith	M. S	criven	
First Name	Middle Name	Last Name	
Debtor 2 (Spouse, if filing) First Name	Middle Name	Last Name	
United States Bankruptcy Court for the:	Eastern District of Pennsylva	ania	
Case number 22 - 11818 AMC			Check if this is:
(If known)			☐ An amended filing
			A supplement showing postpetition chapter 13 income as of the following date:
Official Form 106I			MM / DD / YYYY
Schedule I: You	ır Income		12/15
If you are separated and your spou	ise is not filing with you, d top of any additional pag	lo not include information a	is living with you, include information about your spouse about your spouse. If more space is needed, attach a se number (if known). Answer every question.
Fill in your employment information.		Debtor 1	Debtor 2 or non-filing spouse
If you have more than one job, attach a separate page with information about additional employers.	Employment status	<ul><li>✓ Employed</li><li>☐ Not employed</li></ul>	☐ Employed ☐ Not employed
Include part-time, seasonal, or self-employed work.			Two employed
Occupation may include student or homemaker, if it applies.	Occupation	self employed	
	Employer's name		
	Employer's address	Number Street	Number Street
		City State ZI	IP Code City State ZIP Code
	How long employed ther	e?	
Part 2: Give Details About	Monthly Income		
Estimate monthly income as of spouse unless you are separated		. If you have nothing to report	t for any line, write \$0 in the space. Include your non-filing
If you or your non-filing spouse had below. If you need more space, a			all employers for that person on the lines
			For Debtor 2 or non-filing spouse
List monthly gross wages, sale deductions). If not paid monthly,			\$

Official Form 106l Schedule I: Your Income page 1

3. Estimate and list monthly overtime pay.

4. Calculate gross income. Add line 2 + line 3.

Case 22-11818-amc Doc 28 Filed 07/28/22 Entered 07/28/22 22:22:35 Desc Main Document Page 26 of 30

Debtor 1

Keith M.
First Name Middle Name

Scriven Last Name Case number (if known) 22 - 11818 AMC

		For Debtor 1	For Debtor 2 or non-filing spouse	
Copy line 4 here	<b>→</b> 4.	\$	\$	
5. List all payroll deductions:				
• •	5a.	Φ	¢	
5a. Tax, Medicare, and Social Security deductions  5b. Mandatory contributions for retirement plans	5a. 5b.	\$ \$	\$ \$	
5c. Voluntary contributions for retirement plans	5c.	\$\$		
5d. Required repayments of retirement fund loans	5d.		Φ	
5e. Insurance	5u. 5e.	\$	Ф	
		\$	-	
5f. Domestic support obligations	5f.	\$		
5g. Union dues	5g.	Φ	\$	
5h. Other deductions. Specify:	5h.	+ \$	+ \$	
6. Add the payroll deductions. Add lines 5a + 5b + 5c +	5d + 5e +5f + 5g + 5h. 6.	\$	\$	
7. Calculate total monthly take-home pay. Subtract line	e 6 from line 4. 7.	\$	\$	
8. List all other income regularly received:				
8a. Net income from rental property and from opera profession, or farm	-			
Attach a statement for each property and business receipts, ordinary and necessary business expense monthly net income.		\$_15,000.00	\$	
8b. Interest and dividends	8b.	\$	\$	
8c. Family support payments that you, a non-filing regularly receive	spouse, or a dependent	·		
Include alimony, spousal support, child support, ma settlement, and property settlement.	aintenance, divorce	\$	\$	
8d. Unemployment compensation	8d.	\$	\$	
8e. Social Security	8e.	\$	\$	
8f. Other government assistance that you regularly Include cash assistance and the value (if known) of that you receive, such as food stamps (benefits unc Nutrition Assistance Program) or housing subsidies Specify:	f any non-cash assistance der the Supplemental	\$	\$	
8g. Pension or retirement income	8g.	\$	\$	
8h. Other monthly income. Specify:	8h.	+\$	+\$	
9. Add all other income. Add lines 8a + 8b + 8c + 8d + 8d	e + 8f +8g + 8h. 9.	\$_15,000.00	\$	
10. Calculate monthly income. Add line 7 + line 9.  Add the entries in line 10 for Debtor 1 and Debtor 2 or ne	on-filing spouse. 10.	\$_15,000.00	+ \$	<b>=</b> \$15,000.00
<ol> <li>State all other regular contributions to the expenses Include contributions from an unmarried partner, member friends or relatives.</li> </ol>	•		ommates, and other	
Do not include any amounts already included in lines 2-7	10 or amounts that are not av	ailable to pay expe	nses listed in Schedule J.	
Specify:			11. '	<b>+</b> \$
12. Add the amount in the last column of line 10 to the a Write that amount on the Summary of Your Assets and I			•	\$15,000.00  Combined monthly income
13. Do you expect an increase or decrease within the you	ear after you file this form?			monany moonie
✓ Yes. Explain: Debtor projects his net mont	thly income as \$15,000	.00 and believes	s that he can maintain	this level.

## Case 22-11818-amc Doc 28 Filed 07/28/22 Entered 07/28/22 22:22:35 Desc Main Document Page 27 of 30

		-		196 21 01 00
Fill in this in	nformation to ide	entify your case:		
Debtor 1  Debtor 2 (Spouse, if filing  United States  Case number (If known)	Bankruptcy Court fo	M.  Middle Name  Middle Name  or the: Eastern District of F	Scriven  Last Name  Last Name  Pennsylvania	Check if this is:  An amended filing  A supplement showing postpetition chapter 13 expenses as of the following date:  MM / DD / YYYY
Official I	- -orm 106เ	J		
Sched	lule J: `	Your Expe	1ses	12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach another sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

	er every question.					
Part 1: Des	scribe Your Hou	sehold		_		
1. Is this a joint ca	ase?					
☑ No. Go to li	ine 2.					
Yes. Does [	Debtor 2 live in a s	separate household?				
☐ No ☐ Yes		e Official Form 106J-2, <i>Expenses for S</i>	eparate Household of Debtor 2.			
2. Do you have de		☑ No	Dependent's relationship to Debtor 1 or Debtor 2		Dependent's	Does dependent live
Do not list Debto Debtor 2.	or 1 and	Yes. Fill out this information for each dependent			age	with you?
Do not state the	dependents'			_	<del> </del>	☐ No☐ Yes
names.						□ No
				-	· · · · · · · · · · · · · · · · · · ·	Yes
						☐ No
				-	<del></del>	☐ Yes
				_	<del></del>	□ No
						Yes
				_	<del> </del>	☐ No ☐ Yes
3. Do your expens		<b>☑</b> No				
expenses of pe	eople other than our dependents?	☐ Yes				
expenses of person yourself and yourself and yourself and your expenses as of a applicable date.	our dependents?  nate Your Ongoi  penses as of your  date after the ban	☐ Yes  ing Monthly Expenses  bankruptcy filing date unless you a kruptcy is filed. If this is a supplement	ental Schedule J, check the box			
expenses of person yourself and yourself and yourself and yourself and yourself are the stimate your expenses as of a applicable date.  Include expenses	our dependents?  nate Your Ongoi  penses as of your  date after the ban  s paid for with non	☐ Yes ing Monthly Expenses bankruptcy filing date unless you a	ental <i>Schedule J</i> , check the box  I know the value of			n and fill in the
expenses of person yourself and yourself applicable date.  Include expenses such assistance and yourself and	nate Your Ongoi penses as of your date after the ban s paid for with non and have included	ing Monthly Expenses  bankruptcy filing date unless you ankruptcy is filed. If this is a supplemental assistance if you	ental <i>Schedule J</i> , check the box I know the value of cial Form 106l.)		top of the form	n and fill in the
expenses of person yourself and yourself applicable date.  Include expenses such assistance and yourself and	nate Your Ongoi penses as of your date after the ban s paid for with non and have included home ownership e e ground or lot.	ing Monthly Expenses  bankruptcy filing date unless you a akruptcy is filed. If this is a supplemental assistance if you dit on Schedule I: Your Income (Office)	ental <i>Schedule J</i> , check the box I know the value of cial Form 106l.)	at the	Your expe	n and fill in the
expenses of person yourself and yourself and yourself and yourself and yourself and yourself expenses as of a applicable date.  Include expenses such assistance as 4. The rental or hany rent for the	penses as of your date after the ban and have included home ownership e ground or lot.	ing Monthly Expenses  bankruptcy filing date unless you a akruptcy is filed. If this is a supplemental assistance if you dit on Schedule I: Your Income (Office)	ental <i>Schedule J</i> , check the box I know the value of cial Form 106l.)	at the	Your expe	n and fill in the  nses  3,537.00  785.00
expenses of person yourself and yourself and yourself and yourself and yourself and yourself and yourself expenses as of a applicable date.  Include expenses such assistance at the any rent for the lift not included the lift and included the lift and included the lift and included the lift not included the	penses as of your date after the ban and have included home ownership e ground or lot.	ing Monthly Expenses  bankruptcy filing date unless you a akruptcy is filed. If this is a supplemental assistance if you dit on Schedule I: Your Income (Officexpenses for your residence. Include	ental <i>Schedule J</i> , check the box I know the value of cial Form 106l.)	at the	Your expe	785.00 433.00
expenses of person yourself and expenses as of a applicable date.  Include expenses such assistance at the include of the included and included the	penses as of your date after the ban as paid for with non and have included home ownership e ground or lot.  d in line 4: ate taxes homeowner's, or re-	ing Monthly Expenses  bankruptcy filing date unless you a akruptcy is filed. If this is a supplemental assistance if you dit on Schedule I: Your Income (Officexpenses for your residence. Include	ental <i>Schedule J</i> , check the box I know the value of cial Form 106l.)	4. 4a.	Your expe	n and fill in the  nses  3,537.00  785.00

## Case 22-11818-amc Doc 28 Filed 07/28/22 Entered 07/28/22 22:22:35 Desc Main Document Page 28 of 30

Debtor 1

Keith First Name M.
Middle Name

Scriven Last Name Case number (if known) 22 - 11818 AMC

			Your exp	oenses
5.	Additional mortgage payments for your residence, such as home equity loans	5.	\$	410.00
	Utilities:			
0.	6a. Electricity, heat, natural gas	6a.	\$	445.00
	6b. Water, sewer, garbage collection	6b.	\$	115.00
	6c. Telephone, cell phone, Internet, satellite, and cable services	6c.	\$	
	6d. Other. Specify:	6d.		
7.	Food and housekeeping supplies	7.	\$	300.00
8.	Childcare and children's education costs	8.	\$	
9.	Clothing, laundry, and dry cleaning	9.	\$	
10.	Personal care products and services	10.	\$	
11.	Medical and dental expenses	11.	_	
12.	<b>Transportation.</b> Include gas, maintenance, bus or train fare.  Do not include car payments.	12.	\$	300.00
13.	Entertainment, clubs, recreation, newspapers, magazines, and books	13.	\$	
14.	Charitable contributions and religious donations	14.		
15.	Insurance.  Do not include insurance deducted from your pay or included in lines 4 or 20.			
	15a. Life insurance	15a.	\$	
	15b. Health insurance	15b.	\$	
	15c. Vehicle insurance	15c.	\$	285.00
	15d. Other insurance. Specify:	15d.	\$	
6.	Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20.  Specify:	16.	\$	
17	Installment or lease payments:			
	17a. Car payments for Vehicle 1	17a.	\$	
	17b. Car payments for Vehicle 2	17b.		
	17c. Other. Specify:	17c.		
	17d. Other. Specify:	17d.		
18.	Your payments of alimony, maintenance, and support that you did not report as deducted from your pay on line 5, Schedule I, Your Income (Official Form 106I).	18.		
10			Ψ	
	Other payments you make to support others who do not live with you.  Specify:	19	\$	
	Other real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Incom		,	
	20a. Mortgages on other property	20a.	\$	
	20b. Real estate taxes	20b.		
	20c. Property, homeowner's, or renter's insurance	20c.		
	20d. Maintenance, repair, and upkeep expenses	20d.		
	20e. Homeowner's association or condominium dues	20e.		

# 

Debtor 1 <b>f</b>	Keith First Name	M. Middle Name	Scriven Last Name		Case number (if know	<sub>n)</sub> 22	<u>- 11818 /</u>	AMC
1. Other. Sp	pecify:					21.	+\$	
2. Calculate	your month	y expenses.						
22a. Add	lines 4 throug	n 21.				22a.	\$	6,735.00
22b. Copy	y line 22 (mon	thly expenses	for Debtor 2), if any, from	Official Form 106J-2		22b.	\$	
22c. Add I	line 22a and 2	2b. The result	is your monthly expenses	<b>5.</b>		22c.	\$	6,735.00
23. Calculate	your monthly	net income.						
			nthly income) from Sched	dule I.		23a.	\$	15,000.00
23b. Copy	y your monthl	y expenses fro	m line 22c above.			23b.	-\$	6,735.00
	-	nthly expenses	from your monthly incom	е.		23c.	\$	8,265.00
•			se in your expenses wi					
			ease because of a modific	•				
Yes.	Explain her	e: Debtor wi	Il attempt to modify h	nis mortgage payme	ents.			
			,					

Case 22-11818-amc Doc 28 Filed 07/28/22 Entered 07/28/22 22:22:35 Desc Main

	Just 22 110	10 ame 500 2		Page 30 of 30	Desc Main
Fill in this in	formation to iden	itify your case:			
Debtor 1	Keith	M.	Scriven		
	First Name	Middle Name	Last Name		
Debtor 2 Spouse, if filing)	First Name	Middle Name	Last Name		
Jnited States	Bankruptcy Court for	the: Eastern District of F	Pennsylvania		
ase number	22 - 11818 A	MC			
If known)					Check if this is an
					amended filing
Officia	I Form 106	BDec			
Dool	orotion	About on	la dividual	l Debtor's Schedules	_
Deci	aration	About an	maividua	Deptor's Schedules	12/15
If two mar	ried people are fil	ing together, both are	equally responsible fo	or supplying correct information.	
				nded schedules. Making a false statement, co	
	Sign Below	1997 (1988) 1988 (1988) 1984 (1988) 1984 (1988) 1984 (1988) 1984 (1988) 1984 (1988) 1984 (1988) 1984 (1988) 19			
Did yo	u pay or agree to	pay someone who is N	IOT an attorney to hel	p you fill out bankruptcy forms?	
☑ No					
	. Name of person_			Attach Bankruptcy Petition Preparer's Notice, D	eclaration, and
				Signature (Official Form 119).	
Under that the	penalty of perjury by are true and co	y, I declare that I have i	ead the summary and	schedules filed with this declaration and	
that th	by are true and ce	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,			
		,	)		
×	Sure n	/ \ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\	✓ <b>x</b>		
Signat	ure of Debtor 1		Signature of E	Debtor 2	
	1/25/2	\ <b>a</b> \alpha			